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## FACSIMILE TRANSMITTAL SHEET

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**MAIL STOP: Amendment** **Trueman H. Denny III** **408-737-7200 @124**

COMPANY: DATE:

**USPTO** **AUGUST 6, 2007**

FAX NUMBER: TOTAL NO. OF PAGES INCLUDING COVER:

**571-273-8300** **16**

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## NOTES/COMMENTS:

Docket #	P027.03	By:	THD3	Faxing Date	August 6, 2007
Ser. No:	10/665,882	Filing Date:	09/19/03	Inv(s)	Rinerson et al.
Title:	RESISTIVE MEMORY WITH A TREATED INTERFACE				

The following is being transmitted to the U.S. Patent Office:

Item	Description	# Pgs
1.	Transmittal Form PTO/SB/21	1
2.	Amendment and Response per §41.33	9
3.	Supplemental Application Data Sheet	5
4.		
5.		
6.		
7.		

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PTO/SB/21 (04-07)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

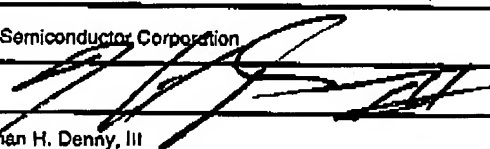
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/665,862	
	Filing Date	September 19, 2003	
	First Named Inventor	Darrell Finerson, et al.	
	Art Unit	2815	
	Examiner Name	Kraig, William F.	
Total Number of Pages in This Submission	18	Attorney Docket Number	P027.03

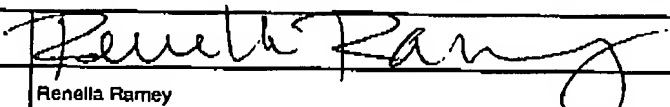
**ENCLOSURES** (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<b>Remarks</b> 1. Unity Fax Cover Sheet - 1 Page 2. Amendment and Response per 37 C.F.R. §41.33 - 9 Pages 3. Supplemental Application Data Sheet - 5 Pages		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Unity Semiconductor Corporation		
Signature			
Printed name	Truman H. Denny, III		
Date	August 6, 2007	Reg. No.	44,652

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Date	August 6, 2007

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